

353 S Broadway St
 P.O. Box 155
 Stanley, Wisconsin
 54768-0155
 715-644-5758
 www.ci.stanley.wi.gov

SPECIAL EVENT PERMIT APPLICATION

Return Completed Form to City Clerk

EVENT DETAILS

Event Name: _____

Start Date: _____ End Date: _____

Event Description: (Briefly describe purpose and planned activities)

Location: _____

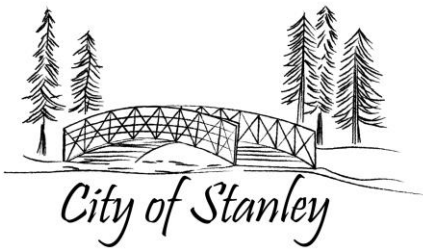
Estimated Attendance: (Daily) _____ (Total) _____

Number of Booths: _____

Sponsoring Organization(s)	Sponsoring Organization Address(es)
_____	_____
_____	_____
_____	_____
_____	_____

EVENT SCHEDULE

Event Dates	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
Setup Day(s)						
Event Start Day						
Event End Day						
Teardown						
Clean Up Day						
Clean Up Complete						



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CONTACT INFORMATION

Primary Contact

Name: _____

Phone: _____ Email: _____

Address: _____

Secondary Contact

Name: _____

Phone: _____ Email: _____

Address: _____

Onsite Contact (Primary)

Name: _____

Phone: _____ Email: _____

Address: _____

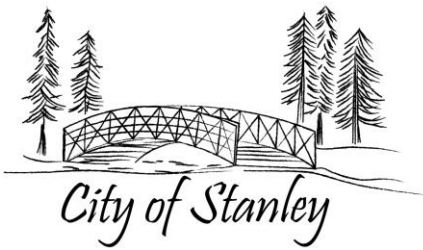
Onsite Contact (Secondary)

Name: _____

Phone: _____ Email: _____

Address: _____

To Note: Either the Primary or the Secondary "Onsite" Contact must always be present at the event.



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INDEMNIFICATION AGREEMENT

Event Name: _____

Organizer (Organization) Name: _____

The event organizer agrees that it, and not the City of Stanley, will be solely responsible for any incidents related to the event. This responsibility includes, but is not limited to, the actions of the event organizer, its officers, employees, agents, and volunteers, as well as event vendors, contractors, subcontractors, participants, and visitors.

In consideration of the City's approval of the Special Event, the organizer agrees to indemnify, defend, and hold harmless the City of Stanley, along with its officers, council members, agents, employees, and authorized volunteers, from and against any and all claims, suits, grievances, damages, costs, expenses, judgments, and liabilities. This includes covering defense costs and reasonable attorney fees, as well as any settlements or judgments entered against the aforementioned individuals and entities.

The event organizer shall comply with the City's insurance requirements for the event, including naming the City of Stanley, its officers, council members, agents, employees, and authorized volunteers as additional insured parties.

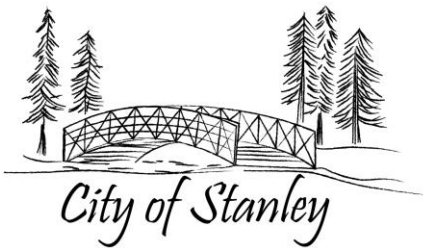
The individual(s) signing this agreement confirms that they have the authority to enter into this agreement on behalf of the event organizer(s).

Authorized Signer (Print Name): _____ **Title:** _____
Signature: _____ **Date:** _____

Additional Signers (If needed)

Authorized Signer (Print Name): _____ **Title:** _____
Signature: _____ **Date:** _____

Authorized Signer (Print Name): _____ **Title:** _____
Signature: _____ **Date:** _____



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EVENT CHECKLIST

Event Type (Check all that apply):

- Festival / Concert
- Religious / Educational
- Rally / Memorial
- Street / Block Party
- Parade / Fun Run / Walk-a-Thon
- Public Assembly
- Sports Tournament (Fishing, soccer, etc.)
- Other: _____

Location:

- Park / Public Property
- If so, please list which park(s): _____

- Street / Sidewalk / Right of Way
- If so, please list which street(s), sidewalk(s), or right of way(s): _____

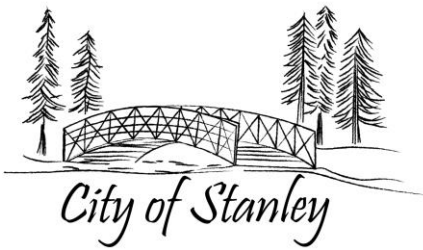
- Private Property
- If so, please list which property(s): _____

Features (Check all that apply, additional permits may be required):

- Alcohol (If Nonprofit: Picnic License) (If Club/Private: Operator License)
- Food / Beverage Sales (Vending Permit)
- Sales Booths
- Tents / Canopies (Diggers Hotline Has been Called?)
- Generators / Electrical
- Fire / Candles (Fire Dept. Open Burning Permit)
- Fireworks (Fire Dept. Permit)
- Extended Park Hours (Time Variance Request)
- Barricades (Street Use Permit)
- Amplified Sound (Music License)
- Animals (Licensed with Proof of Vaccination)
- Cooking Equipment

We (the Organizer) have made Arrangements for:

- Restrooms & Handwashing
- Waste & Recycling Removal
- Event Insurance
- Public Safety / EMS
- Fire Extinguishers
- Advertising / Signage
- Drinking Water
- Weather Contingencies
- Event Insurance
- LP Gas and Tent Heating



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PUBLIC SAFETY & SECURITY PLAN

Emergency Contacts:

Name: _____

Phone: _____ Email: _____

Address: _____

Name: _____

Phone: _____ Email: _____

Address: _____

Name: _____

Phone: _____ Email: _____

Address: _____

Primary Location of Event Staff at Event Site: _____

Where is this Located? _____

Emergency Notifications:

How will safety issues be communicated to competitors? The General Public?

Severe Weather Plan:

Shelter Locations: _____

Have you confirmed that the location(s) will be available and open? (yes/no) _____

Event Cancellation Contact:

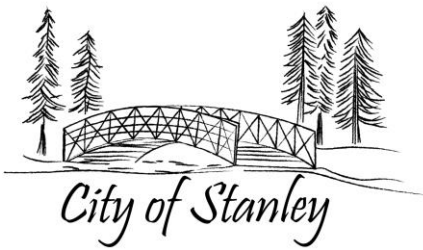
Name: _____

Phone: _____ Email: _____

Address: _____

Site Plan (Attach Drawing) – Must Include:

1. Booths, stages, and event structures
2. First aid stations
3. Entry/Exit points & emergency access roads
4. Fire extinguishers & weather shelters
5. Security & emergency personnel locations
6. Parking & barricades



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EMERGENCY ACTION PLAN

First Aid Plan:

Will medical personnel be on site? Will AEDs be available? Where are your First-Aid Locations?

Weather Monitoring:

Who will monitor & notify attendees in the event of inclement weather?

Emergency Access:

How will emergency vehicles access the site?

Communication Plan:

What communication tools during an emergency will be available to you at the event?

Traffic & Parking:

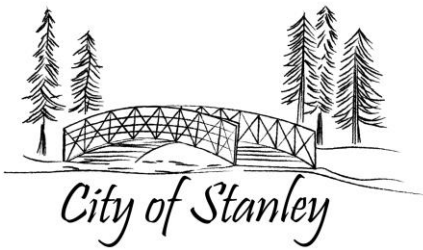
How will traffic be managed/controlled?

Public Impact:

How will neighbors and/or park users be informed of disruptions, alternate routes, and parking options?

Additional:

Please include any other information that you feel should be considered...



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Contingency Plan for Event Sponsors and Organizers

Event sponsors should carefully review and address the following considerations when planning an event. Many of these issues are required by regulations, while others contribute to the overall safety and success of the event. Developing responses to these questions will lead to more effective discussions with city departments during the Special Event Application review process. **By addressing these key areas, event sponsors can ensure a well-prepared, safe, and smoothly operated event.**

Weather-Related Issues

What is the plan if bad weather (rain, snow, severe storms, tornadoes) is expected?

Will the event be canceled? If so, how will attendees be notified?

What is the plan for sudden severe weather? Where will attendees seek shelter?

Who is responsible for guiding them to safety?

Is there a designated safe refuge area for tornadoes or other emergencies?

Medical Emergencies

Where will ambulances have access to the event if needed?

Who will manage crowd control in the event of a medical emergency?

Will a first aid station be available? If so, where and who will staff it?

Outdoor Events

Is there sufficient shade to prevent heat-related illnesses? Will water be provided? If so, where?

Crowd Control

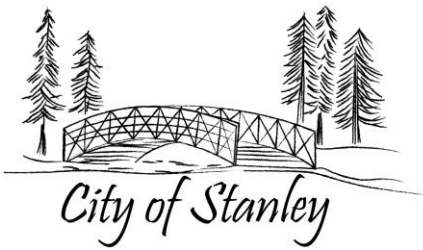
Who is responsible for monitoring barricades?

Who will manage entry gates and ensure proper access and exit?

Who will patrol the area to prevent or de-escalate incidents?

What is the response plan for handling unruly behavior?

Will communication equipment (e.g., radios, cell phones) be provided? () Yes () No



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Security Measures

Will law enforcement officers be present?

If so, contact the Police Department for guidelines on staffing requirements.

If private security or volunteers are used:

Do they have emergency contact numbers for EMS, Fire, and Police? () Yes () No

What procedures will they follow if unauthorized individuals enter restricted areas?

How will noise complaints or other disturbances be handled?

Will secure methods be in place for handling event funds?

Event Logistics

Will there be a designated staging area for support staff? () Yes () No

What time will the event end, and who will manage crowd dispersal?

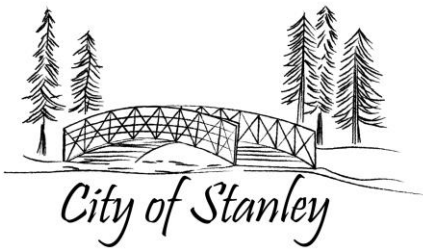
Who is responsible for event cleanup? _____

How will fire lanes and access roads be maintained?

Who is the designated event supervisor responsible for overall coordination?

Are there enough restroom facilities? Where will they be located?

Is there safe and adequate parking for attendees?



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FINAL CHECKLIST

- I have reviewed, understood, and completed the City's contingency and insurance requirements.
- Public Safety Site Plan attached.
- A copy of the organization's liability insurance (if applicable)
- Additional documents attached (if applicable).

Please list Additional Document Title/s: _____

Signature & Certification

I am allowed to sign this application on behalf of the event sponsor and/or organizer. I certify that the information provided is accurate and that I will notify the City of Stanley of any changes.

Event Name: _____

Organizer (Organization) Name: _____

Authorized Signer (Print Name): _____ **Title:** _____

Signature: _____ **Date:** _____

Additional Signers (If needed)

Authorized Signer (Print Name): _____ **Title:** _____

Signature: _____ **Date:** _____

Authorized Signer (Print Name): _____ **Title:** _____

Signature: _____ **Date:** _____

For Internal Use Only:

Approved: Yes No

Date Approved: _____

Approved By: _____

Approved By: _____